



## **Town of Holbrook**

50 N FRANKLIN ST, HOLBROOK, MA 02343 / Telephone: 781-767-4315 Fax: 781-767-9560

### **TOWN OF HOLBROOK SENIOR CITIZEN TAX WORK-OFF ABATEMENT PROGRAM APPLICATION 2022**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ DOB \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

OWNER \_\_\_\_\_ TRUSTEE \_\_\_\_\_ SPOUSE \_\_\_\_\_

#### **Eligibility:**

**60 years of age or older.**

**Domiciled in Holbrook, MA.**

**Homeowner or trustee or spouse of same.**

**Residing at property for which tax relief sought.**

**Not currently working in any capacity as a Board Member or**

**Employee of the Town of Holbrook.**

#### **Income limitations:**

**\$40,000.00 Individual.**

**\$55,000.00 per household**

**Only one tax credit per household may be given. \$500.00**

If you meet all the requirements, please complete the following application.

#### **Section I: Tax Information**

**Attestation:** I am 60 years of age or older. \_\_\_\_\_

**Attestation:** I am domiciled at the street address entered above. \_\_\_\_\_

**Attestation:** Attached is a copy of my 2020 Income tax filing. \_\_\_\_\_

**Attestation:** I am not currently working in any capacity as a Board Member or Employee of the Town of Holbrook \_\_\_\_\_

**Documents Required:** Birth Certificate, 2021 Social Security Statement, 2020 Tax Return.

## Section II: Work Placement

Do you have any medical restrictions, which might affect the type of work you do?

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Please list past work & volunteer experiences as well as types of skills, which would qualify you for a particular volunteer opening:

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If I am accepted for the Tax Credit Program, I understand that I may work for a maximum credit of \$500 per year at a rate of the state minimum wage (currently \$14.25) per hour, and that this tax credit can only be applied toward my Town of Holbrook real estate tax bill.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* The Town of Holbrook reserves the right to discontinue a volunteer's participation in the program if the Town deems the volunteer's participation to be nonbeneficial to the volunteer, the program or the Town.

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## Section III: Disposition of application

Interviewed on \_\_\_\_\_

Eligible \_\_\_\_\_

Ineligible \_\_\_\_\_

Placement \_\_\_\_\_

Waiting List for \_\_\_\_\_

Signature \_\_\_\_\_

***(THIS FORM MUST BE RECEIVED, REVIEWED AND AUTHORIZED PRIOR TO THE APPLICANT STARTING THEIR ABATEMENT WORK-OFF)***